Kidney and Urologic Diseases - End-Stage Renal Disease

Summary of Methods and Data for Estimate of Costs of Illness

Estimated Total Economic Cost
 Estimated Direct Cost
 Estimated Indirect Cost
 Reference Year
 Not available
 Not available
 1997

IC Providing the Estimate

NIDDK

Direct Costs Include: Other related nonhealth costs

No

Indirect Costs Include:

Mortality costs

Morbidity costs: Lost workdays of the patient

Morbidity costs: Reduced productivity of the patient

Lost earnings of unpaid care givers

Other related nonhealth costs

Not Available

Interest Rate Used to Discount Out-Year Costs

Not Available

Not Available

2. Category code(s) from the International Classification of Diseases, 9th Revision, Clinical Modification,(ICD-9-CM) for all diseases whose costs are included in this estimate: <u>585</u>; 586.

3. Estimate Includes Costs:

Of related conditions beyond primary, strictly coded ICD-9-CM category No Attributable to the subject disease as a secondary diagnosis No Of conditions for which the subject disease is an underlying cause No

- 4. Population Base for Cost Estimate (Total U.S. pop or other)

 Total U.S. pop.
- 5. Annual (prevalence model) or Lifetime (incidence model) Cost: Annual
- 6. Perspective of Cost Estimate (Total society, Federal budget, or Other)
 7. Approach to Estimation of Indirect Costs
 Federal budget
 Human Capital
- 8. <u>Source of Cost Estimate</u>: (Reference published or unpublished report, or address and telephone of person/office responsible for estimate)

U.S. RENAL DATA SYSTEM, USRDS 1999 Annual Data Report, National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases, Bethesda, MD, 1999.

9. Other Indicators of Burden of Disease:

Health Care Financing Administration Medicare ESRD Program Annual Reports

10. Commentary:

The United States Renal Data System is a database funded through a contract by NIDDK to the University of Michigan, to develop and maintain data on patients with end stage kidney disease in the United States. The USRDS database is updated yearly by the Health Care Financing Administration (HCFA) Medicare Program's Program Management and Medical Information files (PMMIS). These files contain information on age, race, gender, data of onset and cause of

of end stage renal disease, and health services utilization and cost data through the administrative billing records of dialysis unit sessions, and hospitalizations. The database is complete for approximately 93% of treated ESRD patients in the United States.